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STATE OF WISCONSIN BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF THE APPLICATION FOR A LICENSE TO PRACTICE

FINAL DECISION AND ORDER LS9209141MED

CLARE NUSS GEFKE,

OCCUPATIONAL THERAPY OF

APPLICANT.

The State of Wisconsin, Medical Examining Board, having considered the above-captioned matter and having reviewed the record and the Proposed Decision of the Administrative Law Judge, makes the following:

ORDER

NOW, THEREFORE, it is hereby ordered that the Proposed Decision annexed hereto, filed by the Administrative Law Judge, shall be and hereby is made and ordered the Final Decision of the State of Wisconsin, Medical Examining Board.

The rights of a party aggrieved by this Decision to petition the board for rehearing and the petition for judicial review are set forth on the attached "Notice of Appeal Information."

Dated this 25 day of MMM

Clark Ollew ver

STATE OF WISCONSIN BEFORE THE MEDICAL EXAMINING BOARD

IN THE MATTER OF THE APPLICATION FOR A LICENSE TO PRACTICE OCCUPATIONAL THERAPY OF

CLARE NUSS GEFKE,

PROPOSED DECISION LS9209141MED

APPLICANT.

The parties to this proceeding for purposes of s. 227.53, Wis. Stats., are:

Clare Nuss Gefke 5521 N. Lydell Ave. Glendale, WI 53217

Medical Examining Board 1400 East Washington Avenue P.O. Box 8935 Madison WI 53708

The above-captioned matter was commenced as a class 1 proceeding within the meaning of Wis. Stats. sec 227.01(3)(a), by the filing of a Notice of Hearing on September 14, 1992. The purpose of the proceeding was to provide the applicant, Clare Nuss Gefke, a hearing upon the denial of her application for a license to practice occupational therapy by the Medical Examining Board on the basis that she had failed to obtain a passing grade on an oral examination. The Notice of Hearing stated, in material part:

"The issue raised for consideration at the hearing on the denial of your application for licensure is:

"Whether you provided minimally competent responses to questions 14, 15 and 20 of the oral examination conducted on April 27, 1992."

The hearing was held on November 5, 1992 in Room 133 at 1400 East Washington Avenue, Madison, Wisconsin. The applicant appeared personally and by legal counsel, Henry J. Gefke, 735 North Water Street, Milwaukee, Wisconsin 53202.

Gilbert C. Lubcke appeared as attorney for the Department of Regulation and Licensing, Division of Enforcement, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708. A transcript of the hearing was prepared and filed on December 1, 1992.

Based upon the record herein, the administrative law judge recommends that the Medical Examining Board adopt as its final decision in this case the following Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

- 1. Clare Nuss Gefke (Applicant), 5521 N. Lydell Avenue, Glendale, Wisconsin 53217, applied for a license to practice occupational therapy in the State of Wisconsin.
- 2. Applicant is required to pass an oral examination in order to receive a license to practice occupational therapy.
- 3. The oral examination consists of 20 questions relating to the skills likely to be needed to practice as an occupational therapist. A candidate must answer 15 correctly to receive a passing score. A candidate must correctly answer each question in its entirety to receive credit for the response; partial credit is not given upon any question. Each question has a predetermined correct answer taken from an authoritative text in the field.
- 4. Prior to the oral examination, candidates are given twenty minutes to review and make written notes concerning the actual questions which they will be asked. Candidates are permitted to take the questions and their notations into the examination room.
- 5. The oral examination is conducted on behalf of the Medical Examining Board by two professional members of the Occupational Therapy Counsel. After each question is asked and answered, the examiners independently evaluate the candidate's response on a pass or fail basis and record the result on separate score sheets.
- 6. Applicant took the oral examination on April 27, 1992. She was credited with having provided correct responses to 14 of the 20 questions. Subsequently, the Applicant was notified that the Medical Examining Board had determined she failed to obtain a passing grade on the oral examination, and that her license application was denied on that basis.
- 7. The Applicant requested a hearing to contest the denial of her license on the basis that she had been incorrectly judged to have provided failing responses to questions #14, #15 and #20.

8. Question #14 of the oral examination given on April 27, 1992 stated:

"In motor recovery after CVA, how does function return? Give two examples of the direction the return of function usually progresses."

At the conclusion of the hearing, the Applicant conceded that she failed to give the correct answer to question #14 at her oral examination.

9. Question #15 of the oral examination given on April 27, 1992 stated:

"Spinning an individual on a nystagmus board, scooter board, or hanging swing is a vestibular activity which can stimulate the central nervous system. Identify at least two potentially adverse effects of this activity."

The Applicant's answer to this question during her examination included: increased spasticity; impaired thinking to get them hyperactive; and, falling and getting hurt.

The correct answer to question #15 is: seizures, nausea, fatigue, dizziness, blood pressure changes, long lasting neurological effects after stimulation is provided, and spasticity.

Although the Applicant's response, spasticity, is correct, the others were not. Accordingly, the Applicant did not identify at least two potentially adverse effects as was necessary to be credited with a correct response to question #15.

10. Question #20 of the oral examination given on April 27, 1992 stated:

"Define positive and negative reinforcement from a behaviorial therapy perspective."

The Applicant correctly defined positive reinforcement.

However, she defined negative reinforcement as "kind of like a restriction or a time out." The correct definition of negative reinforcement is the withdrawal of an unpleasant or aversive stimulus when a desired change of behavior has taken place.

Although the Applicant's definition of positive reinforcement is correct, her definition of negative reinforcement is not. Accordingly, the Applicant did not provide the correct response to question #20.

11. As the Applicant provided only 14 correct responses to the 20 questions, she failed the oral examination given on April 27, 1992.

CONCLUSIONS OF LAW

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- 1. The Medical Examining Board has jurisdiction in this proceeding pursuant to Wis. Stats. sec. 448.06(2).
- 2. The Medical Examining Board may deny an application for a license to practice occupational therapy on the basis of the failure of an applicant to achieve a passing grade on an oral examination, pursuant to Wis. Stats. sec. 448.06(2).

ORDER

NOW, THEREFORE, IT IS ORDERED that the application of Claire Nuss Gefke for a license to practice occupational therapy in the State of Wisconsin shall be, and hereby is denied.

OPINION

The applicant, Claire Nuss Gefke, was denied a license to practice occupational therapy on the basis that she failed to successfully pass the oral examination administered on April 27, 1992. Ms. Gefke requested a hearing on that denial, and this proposed decision is based upon the hearing held.

This action is designated as a "class 1 proceeding", which is described within Wis. Stats. sec. 227.01(3)(a), as one in which the Medical Examining Board "...acts under standards conferring substantial discretionary authority upon the agency." Such discretion is essentially based upon the premise that one of the primary purposes for the legislative creation of the board is to assure the public that its licensees are competent to perform professional services at a minimal standard. The granting of a professional license constitutes an assurance to the public of competency. See, Strigenz v. Department of Regulation and Licensing, 103 Wis.2d 281, 287 (1981).

Ms. Gefke does not challenge the examination process, grading criteria or the validity of the examination as it relates to the skills likely to be needed for an applicant to practice as an occupational therapist.

The issue to be determined is the correctness of her responses to questions #15 and #20. At the close of the hearing, the she conceded that she had not satisfactorily responded to question #14. Therefore, this opinion will address only the adequacy of her answers to questions #15 and #20.

THE EXAMINATION PROCESS

Ms. Gefke was escorted to a room to await her turn for examination when she arrived at the department on April 27, 1992. She was given a booklet containing the 20 examination questions which she would be asked. Ms. Gefke had twenty minutes in which to review the questions and make written notations in the booklet. The booklet was then collected from her, but returned for her reference when her examination began.

The examination was conducted by two members of the Occupational Therapy Council. The examination process was explained to Ms. Gefke, and she was reminded that she would need 15 correct answers to achieve a passing score. The exam was conducted in a question-answer format. After each response, the examiners determined whether the response should be scored "pass" or "fail". Each examiner made this determination independently and without consulting the other. The results were recorded by each examiner on separate score sheets. (Exhibit #4).

The result of Ms. Gefke's oral examination was that each of the examiners credited her with 14 correct answers. A comparison of the two score sheets indicates that the examiners were in agreement regarding the questions she had passed, and those which were failed. For our purposes, both examiners recorded a failure for Ms. Gefke's responses to questions #15 and #20.

QUESTION #15: ADVERSE EFFECTS OF VESTIBULAR ACTIVITY

The transcript of the Ms. Gefke's oral examination (Exhibit #3), provides the following question and response:

Examiner: Number 15. Spinning an individual on a nystagmus board, scooter board, or hanging swing is a vestibular activity which can stimulate the central nervous system. Identify at least two potentially adverse effects of this activity.

Clare: You could possibly increase spasticity. Possibly increase tone.

Examiner: What other adverse effects might you see?

Clare: Could impair their wait just possibly could even impair their thinking to get them hyperactive.

Examiner: Other adverse effects? Would you like to move on?

Clare:

No spasticity is one. I didn't answer that with the other one?

Spasticity. Um. I--"

Examiner: You need at least two potentially adverse effects.

Clare:

You could get hurt. You could actually fall and get hurt, physically.

Examiner: O.K.

Clare:

Mm, I mean that's the reality that you could could happen if you were

doing it.

Examiner: O.K.

Claire:

And that could be any number of things in terms of being hurt. I mean you you could go to the point where I suppose you'd bust a bone if you did it right and somebody fell on top of ya and the board went on top of ya I mean you could have some kind of a fracture.

Examiner: O.K.

A candidate was required to state at least two of the concerned adverse effects in order to obtain credit for this question. The "Examiner Grading Criteria" (Exhibit #2) named the textbook source for the question as Occupational Therapy Practice Skills for Physical Dysfunction, Lorraine Williams Pedretti, C.V. Mosby Company. The predetermined six correct answers for the question were:

- 1. Seizures
- 2. Nausea
- 3. Fatigue
- 4. Dizziness
- 5. Blood pressure changes
- 6. Long lasting neurological effects after stimulation is provided.

The adverse factors recited by Ms. Gefke were spasticity, impairment of thinking leading to hyperactivity, and bodily injury through falling. None of these responses fall into any of the six categories specifically listed as correct answers.

Sandra Louise Rogers is an occupational therapist who testified for the state and evaluated the examination responses of Ms. Gefke. Ms. Rogers attested to the correctness of the adverse factors listed on the "Examiner Grading Criteria".

However, she also believed that "spasticity", a response given by Ms. Gefke, should be given credit. Ms. Rogers testified, as follows:

- A. All those answers (on the "Examiner Grading Criteria") are correct. They all indicate that some type of autonomic nervous system stimulation, that the autonomic nervous system has been overstimulated. Seizures, nausea, fatigue, dizziness, blood pressure changes, neurological effects, would all be -- could all be potential adverse effects. The only one that is not on that list would be the increase in spasticity which is also considered a risk of increasing -- after you use vestibular stimulation it's also considered an adverse effect.
- Q. So basically what you're telling us is that in addition to the six answers specified in the grading criteria, in your professional opinion, there should be a seventh, and that should be spasticity?
- A. Yes, that's correct.
- Q. Can you explain for me what you mean by spasticity?
- A. Spasticity would be an increase in muscle tone. That would be either a general increase in muscle activity that such that you would see with a child who had mild spasticity an inclination to, for example, hold their arms closer to their body, then in this position they would be holding their arms closer to their body and that would even increase more. So that their underlying muscle tone would be increased.

(Transcript, pp. 70-71).

The acceptance of "spasticity" as a correct response, however, does not serve to give Ms. Gefke credit for the question, since two adverse effects must be provided. Ms. Rogers did not believe that the other responses--impairment of thinking leading to hyperactivity, and bodily injury through falling--were correct. As to the accuracy of these responses, Ms. Rogers testified:

A. Impaired thinking and getting hurt are not necessarily adverse effects of the central nervous system being activated by the vestibular activity.

- Q. In your professional opinion, would those constitute correct responses to that question?
- A. No, they would not.
- Q. There's a reference there also to impairing their thinking to get them hyperactive. How does hyperactivity play into this?
- A. Well, generally you would not expect hyperactivity to be a result of the vestibular stimulation. You would perhaps expect the child to be less hyperactive after vestibular stimulation.

* * * *

- Q. And in your professional opinion, would (falling and getting hurt) be a correct response?
- A. No, it would not. The question asks for potentially adverse effects to the central nervous system and that would not be a potentially adverse effect of the nervous system of using vestibular stimulation. It is very unlikely that you would see someone getting hurt during use of this equipment...."

(Transcript, pp. 72-73).

Despite the testimony above, Ms. Gefke contended that her responses of "impaired thinking" and "falling" were similar in nature to the accepted answers (especially nausea, fatigue and dizziness), and should be accepted as well. However, Ms. Rogers' testimony was that, at best, Ms. Gefke's offered reactions would be secondary to the adverse effects listed as correct answers. For example, although "impaired thinking" or confusion, and "falling" could constitute results stemming from nausea, fatigue or dizziness, they—unlike nausea, fatigue or dizziness—would not be caused directly by the vestibular stimulation, which was the thrust of the question. (Trans., pp. 115-117).

Based upon a review of the text authority, as well as the testimony of Ms. Rogers, it cannot be concluded that Ms. Gefke was able to verbalize an accurate second potential adverse effect, in addition to spasticity, stemming from the vestibular activity stated in the question.

OUESTION #20: POSITIVE AND NEGATIVE REINFORCEMENT

The oral examination concerning question #20, was as follows:

Examiner: Number 20. Define positive and negative reinforcement from a behaviorial therapy perspective.

Clare: Positive reinforcement are rewards. Negative reinforcement would could be kind of like a restriction or a time out. Some areas, but I believe they're getting away from that, used to use a time out box in behavioral therapy for certain specific kinds of behaviors and I believe that that's being ruled as changed to be modified to a molded chair-something like that so it's not like an isolated environment.

According to the "Examiner Grading Criteria" (Exhibit #2), the correct response to this question was:

"Positive: a pleasing or need fulfilling event or reward is offered

for a desired change in behavior

"Negative: withdrawal of an unpleasant or aversive stimulus when a desired change of behavior has taken place"

These definitions were, in turn, taken from Willard and Spackman's <u>Occupational</u> <u>Therapy</u>, where it is states:

"From the behavior therapy perspective, there are four systems that determine the way learning takes place: positive reinforcement, negative reinforcement, punishment, and extinction. Positive reinforcement is a pleasing or need-fulfilling event; negative reinforcement is the withdrawal of an unpleasant or aversive stimulus when a change of behavior has taken place; punishment refers to the presentation of an unpleasant stimulus; extinction is the withdrawal of a pleasing stimulus or the bombardment with the original reinforcer with a resultant decrease in the behavior.

"For example, a parent's smiles and praise when the child brings home a good report care are a form of positive reinforcement. The child learns that good grades please his or her parents; if that is important, the child has learned to work for good grades. When a child works hard to get good grades in order to avoid being nagged and scolded, the child has

learned to do so through negative reinforcement. Punishment is the presentation of an unpleasant or aversive stimulus or the withdrawal of a pleasant stimulus following the occurrence of some undesirable behavior. The child might be punished for receiving poor grades by being spanked or scolded or by not being allowed to go out to play. If parents stop praising the child for receiving good grades, the child may stop trying to please them in that way, or, if the parents give too much praise too continuously, the effect will be one of satiation and child will stop trying. These are two examples of extinction." (Exhibit #7, p. 288).

Ms. Rogers testified that she agreed with the definitions and statements made in the above-quoted article. She also testified that although the applicant had appropriately defined positive reinforcement, Ms. Gefke had confused "negative reinforcement" with "punishment".

"A. The use of positive reinforcement as rewards or positive reinforcement are rewards is a correct answer. Positive reinforcement is any type of positive stimulus that is given to reinforce a desired behavior. Negative reinforcement, on the other hand would be a taking away or a removal of an adverse stimuli to facilitate the desired behavior. The (applicant's) answer that is here for negative reinforcement then is not correct. Negative reinforcement would be a restriction or a time-out are not examples of negative reinforcement or a correct description of what negative reinforcement is.

"Q. What is Ms. Gefke in fact describing in that situation?

"A. In my opinion what she is describing is punishment."

(Trans., p. 77).

Ms. Rogers went on to indicate that the primary distinction between negative reinforcement and punishment is that the former involves the <u>removal</u> of adverse stimuli when a change in behavior has taken place, while the latter concerns its <u>introduction</u>. (Trans., pp. 77-78). Ms. Rogers also stated that it was important for an occupational therapist to recognize the distinction between negative reinforcement and punishment, because the former is conducive to facilitating desired behavior changes while the latter is not. (Trans., pp. 78, 81-82).

Based upon the testimony of Ms. Rogers and the textual presentations, it does not appear that Ms. Gefke correctly defined the professional term "negative reinforcement" at her oral examination.

The evidence in this case is such that I find Ms. Gefke did not provide correct responses to the questions from the oral examination which she has challenged in this proceeding. Accordingly, it is recommended that the application for a license to practice occupational therapy be denied.

Dated: February 2, 1993.

Respectfully submitted,

Donald R. Rittel

Administrative Law Judge

BDLS2-2733

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NOTICE OF APPEAL INFORMATION

(Notice of Rights for Rehearing or Judicial Review, the times allowed for each, and the identification of the party to be named as respondent)

The following notice is served on you as part of the final decision:

1. Rehearing.

Any person aggrieved by this order may petition for a rehearing within 20 days of the service of this decision, as provided in section 227.49 of the Wisconsin Statutes, a copy of which is attached. The 20 day period commences the day after personal service or mailing of this decisi n. (The date of mailing of this decision is shown below.) The petition for rehearing should be filed with the State of Wisconsin Medical Examining Board.

A petition for rehearing is not a prerequisite for appeal directly t circuit court through a petition for judicial review.

2. Judicial Review.

Any person aggrieved by this decision has a right to petition for judicial review of this decision as provided in section 227.53 of the Wisconsin Statutes, a copy of which is attached. The petition should be filed in circuit court and served upon the State of Wisconsin Medical Examining Board

within 30 days of service of this decision if there has been no petition for rehearing, or within 30 days of service of the order finally disposing of the petition for rehearing, or within 30 days after the final disposition by operation of law of any petition for rehearing.

The 30 day period commences the day after personal service r mailing of the decision or order, or the day after the final disposition by operation of the law of any petition for rehearing. (The date of mailing of this decision is shown below.) A petition for judicial review should be served upon, and name as the respondent, the following:

the Strate of Wisconsin Medical Examining Board.

The date of mailing of this decision is March 26, 1993.

221.49 Petitions for renearing in contested cases. (1) A petition for rehearing shall not be a prerequisite for appeal or review. Any person aggrieved by a final order may, within 20 days after service of the order, file a written petition for rehearing which shall specify in detail the grounds for the relief sought and supporting authorities. An agency may order a rehearing on its own motion within 20 days after service of a final order. This subsection does not apply to s. 17.025 (3) (e). No agency is required to conduct more than one rehearing based on a petition for rehearing filed under this subsection in any contested case.

(2) The filing of a petition for rehearing shall not suspend or delay the effective date of the order, and the order shall take effect on the date fixed by the agency and shall continue in effect unless the petition is granted or until the order is superseded, modified, or set aside as provided by law.

(3) Rehearing will be granted only on the basis of:

(a) Some material error of law.

(b) Some material error of fact.

(c) The discovery of new evidence sufficiently strong to reverse or modify the order, and which could not have been previously discovered by due diligence.

(4) Copies of petitions for rehearing shall be served on all parties of record. Parties may file replies to the petition.

(5) The agency may order a rehearing or enter an order with reference to the petition without a hearing, and shall dispose of the petition within 30 days after it is filed. If the agency does not enter an order disposing of the petition within the 30-day period, the petition shall be deemed to have been denied as of the expiration of the 30-day period.

(6) Upon granting a rehearing, the agency shall set the matter for further proceedings as soon as practicable. Proceedings upon rehearing shall conform as nearly may be to the proceedings in an original hearing except as the agency may otherwise direct. If in the agency's judgment, after such rehearing it appears that the original decision, order or determination is in any respect unlawful or unreasonable, the agency may reverse, change, modify or suspend the same accordingly. Any decision, order or determination made after such rehearing reversing, changing, modifying or suspending the original determination shall have the same force and effect as an original decision, order or determination.

227.52 Judicial review; decisions reviewable. Administrative decisions which adversely affect the substantial interests of any person, whether by action or inaction, whether affirmative or negative in form, are subject to review as provided in this chapter, except for the decisions of the department of revenue other than decisions relating to alcohol beverage permits issued under ch. 125, decisions of the department of employe trust funds, the commissioner of banking, the commissioner of credit unions, the commissioner of savings and loan, the board of state canvassers and those decisions of the department of industry, labor and human relations which are subject to review, prior to any judicial review, by the labor and industry review commission, and except as otherwise provided by law.

227.53 Parties and proceedings for review. (1) Except as otherwise specifically provided by law, any person aggrieved by a decision specified in s. 227.52 shall be entitled to judicial review thereof as provided in this chapter.

(a) 1. Proceedings for review shall be instituted by serving a petition therefor personally or by certified mail upon the agency or one of its officials, and filing the petition in the office of the clerk of the circuit court for the county where the judicial review proceedings are to be held. If the agency whose decision is sought to be reviewed is the tax appeals commission, the banking review board or the consumer credit review board, the credit union review board or the savings and loan review board, the petition shall be served upon both the agency whose decision is sought to be reviewed and the corresponding named respondent, as specified under par. (b) 1 to 4.

2. Unless a rehearing is requested under s. 227.49, petitions for review under this paragraph shall be served and filed within 30 days after the service of the decision of the agency upon all parties under s. 227.48. If a rehearing is requested under s. 227.49, any party desiring judicial review shall serve and file a petition for review within 30 days after service of the order finally disposing of the application for rehearing, or within 30 days after the final disposition by operation of law of any such application for rehearing. The 30-day period for serving and filing a petition under this paragraph commences on the day after personal service or mailing of the decision by the agency.

3. If the petitioner is a resident, the proceedings shall be held in the circuit court for the county where the petitioner resides, except that if the petitioner is an agency, the proceedings shall be in the circuit court for the county where the respondent resides and except as provided in ss. 77.59 (6) (b), 182.70 (6) and 182.71 (5) (g). The proceedings shall be in the circuit court for Dane county if the petitioner is a nonresident. If all parties stipulate and the court to which the parties desire to transfer the proceedings agrees, the proceedings may be held in the county designated by the parties. If 2 or more petitions for review of the same decision are filed in different counties, the circuit judge for the county in which a petition for review of the decision was first filed shall determine the venue for judicial review of the decision, and shall order transfer or consolidation where appropriate.

(b) The petition shall state the nature of the petitioner's interest, the facts showing that petitioner is a person aggreed by the decision, and the grounds specified in s. 227.57 upon which petitioner contends that the decision should be reversed or modified. The petition may be amended, by leave of court, though the time for serving the same has expired. The petition shall be entitled in the name of the person serving it as petitioner and the name of the agency whose decision is sought to be reviewed as respondent, except that in petitions

for review of decisions of the following agencies, the latter agency specified shall be the named respondent:

1. The tax appeals commission, the department of revenue

2. The banking review board or the consumer credit review board, the commissioner of banking.

3. The credit union review board, the commissioner of credit unions.

4. The savings and loan review board, the commissioner of savings and loan, except if the petitioner is the commissioner of savings and loan, the prevailing parties before the savings and loan review board shall be the named respondents.

(c) A copy of the petition shall be served personally or by certified mail or, when service is timely admitted in writing, by first class mail, not later than 30 days after the institution of the proceeding, upon each party who appeared before the agency in the proceeding in which the decision sought to be reviewed was made or upon the party's attorney of record. A court may not dismiss the proceeding for review solely because of a failure to serve a copy of the petition upon a party or the party's attorney of record unless the petitioner fails to serve a person listed as a party for purposes of review in the agency's decision under s. 227.47 or the person's attorney of record.

(d) The agency (except in the case of the tax appeals commission and the banking review board, the consumer credit review board, the credit union review board, and the savings and loan review board) and all parties to the proceeding before it, shall have the right to participate in the proceedings for review. The court may permit other interested persons to intervene. Any person petitioning the court to intervene shall serve a copy of the petition on each party who appeared before the agency and any additional parties to the judicial review at least 5 days prior to the date set for hearing on the petition.

(2) Every person served with the petition for review as provided in this section and who desires to participate in the proceedings for review thereby instituted shall serve upon the petitioner, within 20 days after service of the petition upon such person, a notice of appearance clearly stating the person's position with reference to each material allegation in the petition and to the affirmance, vacation or modification of the order or decision under review. Such notice, other than by the named respondent, shall also be served on the named respondent and the attorney general, and shall be filed. together with proof of required service thereof, with the clerk of the reviewing court within 10 days after such service. Service of all subsequent papers or notices in such proceeding need be made only upon the petitioner and such other persons as have served and filed the notice as provided in this subsection or have been permitted to intervene in said proceeding, as parties thereto, by order of the reviewing court.